

APR 14 2005

sanofi pasteur

The vaccines business of sanofi-aventis Group

Intellectual Property – Knerr Building
One Discovery Drive
Swiftwater, PA 18370 USA

Telephone: 570-839-5537
Facsimile: 570-895-2702
E-Mail: robert.yoshida@sanofipasteur.com

Fax

To:
Mailstop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Facsimile: (703) 872-9306

From:
Robert Yoshida
Sanofi Pasteur Inc.

This facsimile is 20 pages, including this cover page

April 14, 2005

Re: Appl. No.: 10/043,344
Applicant: Loosmore et al.
Filed: January 14, 2002
Title: Transferrin Receptor Genes
TC/A.U.: 1645
Examiner: Hines, Jana A
Docket No.: 1038-1221 MIS:jb

This facsimile consists of:

Transmittal Form (1 page)
Petition for Extension of Time Under 37 CFR 1.136(a) (1 page)
Credit Card Payment Form (1 page)
Amendment (15 pages)
Certificate of Transmission under 37 CFR 1.8 (1 page)

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PTO/SB/21 (08-04)

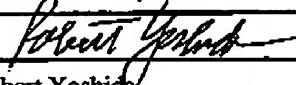
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/043,344	
	Filing Date	January 14, 2002	
	First Named Inventor	Sheena M Loosmore	
	Art Unit	1645	
	Examiner Name	Hines, Jana A	
Total Number of Pages in This Submission	19	Attorney Docket Number	1038-1221 MIS:jb

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Payment Form and Certificate of Transmission
Remarks: The total number of pages of this submission includes this Transmittal Form.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Sanofi Pasteur, Inc.		
Signature			
Printed name	Robert Yoshida		
Date	April 14, 2005	Reg. No.	54,941

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U.S. Appl. No. 10/043,344, filed January 14, 2002
Attorney Docket No. 1038-1221 MIS:jb

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